

Safety Concerns with the Michigan Behavioral Health Standard Consent Form (MDHHS-5515): What if I Have Experienced Domestic Violence, Sexual Assault, or Stalking?

Because many people have more than one health care provider, systems for sharing information among providers have been developed to prevent mistakes, coordinate care, and save time and money. Although sharing health information among care providers has many benefits, it may also present safety risks for people who have experienced domestic violence, sexual assault, and/or stalking. If you have experienced domestic violence, sexual assault, and/or stalking, this document can help you talk with your health care provider about your situation, so that you can arrive at an informed choice about sharing your health information with other care providers. These questions also contain information about resources for advocacy, safety consultation, and other forms of support.

1. What responsibility does my health care provider have to keep my information confidential?

Your health information includes records and communications with your care provider about the services, tests, diagnoses, and treatment that you receive. Several state and federal laws protect the privacy of your health information. One of these laws is the federal Health Insurance Portability and Accountability Act (HIPAA). HIPAA allows your care provider to share your health information without your written permission for a purpose directly related to your health care, like treating your condition, or paying your health care bill. Your care provider may also share information without your permission for things like making sure doctors give good care, making sure health care facilities are clean and safe, or reporting when the flu is in your area. In other cases not directly related to your care, your health care provider must get your written permission to share your health information. For example, HIPAA requires your care provider to get your written permission to give your health information to your employer, or to share it for things like marketing and advertising.

Some types of health information get extra protection under federal and state laws. These laws require your care provider to get your written consent to share:

- Behavioral and mental health services.
- Referrals and treatment for an alcohol or substance use disorder.

Organizations that get certain types of federal funding to provide services for domestic violence, sexual assault, or stalking must also get your written consent before disclosing any personally identifying information or individual information about you. The only exceptions to this very strict requirement are cases where a law or court order requires the provider to disclose the information. These exceptions may include reporting child abuse or neglect, or obeying a subpoena to provide information in a legal case.

If you have questions about your care provider's duty to protect your health information, ask your provider.

2. How do I give my health care provider written consent to share information about behavioral and mental health services, or referrals and treatment for alcohol or substance use disorders?

The State of Michigan Department of Health and Human Services has developed a standard form for giving permission to share these types of health information. The form has the number MDHHS-5515 printed in the lower left corner. If you have received services for domestic violence, sexual assault, or stalking, this form may not provide you with the security you need. If you are worried that the health information you agree to share might be revealed to someone who could use it to harm you, this document will help you to talk with your health care provider. Together, you and your health care provider might decide that ***you should use a different, more restrictive consent form than MDHHS 5515.*** In some cases, your health care provider might be required to use a different, more restrictive form due to the federal funding requirements described in [question 1](#).

Learn more about MDHHS-5515 (the Michigan Behavioral Health Standard Consent Form) at www.michigan.gov/bhconsent.

3. Why might I need a separate form to share information about behavioral and mental health services, or referrals and treatment for alcohol or substance use disorders if I received services for domestic violence, sexual assault, or stalking?

If you have experienced domestic violence, sexual assault and/or stalking, it may be important to your safety to limit the sharing of your health care information. Use of a separate form allows you to tailor information sharing to your individual needs.

Additionally, the Michigan Behavioral Health Standard Consent Form (MDHHS-5515) does not comply with the very strict privacy requirements that apply to agencies receiving certain types of federal funding to serve people who have experienced domestic violence, sexual assault or stalking. These federal requirements are described in [question 1](#).

Learn more about MDHHS-5515 (the Michigan Behavioral Health Standard Consent Form) at www.michigan.gov/bhconsent.

4. Why might I want to release information from my health care records?

If you are getting treatment from more than one care provider, sharing your health information among these providers can:

- Reduce the number of times you have to repeat your health history.
- Ensure that any services or treatments prescribed do not conflict with each other.
- Improve coordination of services between different care providers.
- Reduce the likelihood of mistakes in providing your care.
- Save time and money for you and your care providers.

5. What should I think about before I decide to release information from my health care records if I have experienced domestic violence, sexual assault, or stalking?

- How may sharing information help me? What might happen if I don't share this information?
- Will sharing help the person I'm afraid of to locate me? What might happen if that person locates me?
- Will the person I'm afraid of find out that I've talked with someone about abuse? What might happen if that person finds out?
- Will the person I'm afraid of get access to the information I shared? How might that person use this information to hurt me?
- Who will receive the information I share? How that person will use it? Will that person keep it confidential? With whom might that person share it? Where/how it might be stored?
- If I share this information, will I have trouble keeping other information about my health care confidential in the future?
- Could knowledge of my health care needs or history bias others in their interactions with me?

6. If I decide to release information from my health care records, how might I reduce the risks from domestic violence, sexual assault, or stalking?

Get help and information:

- Talk with your care provider about the risks of sharing information and any specific concerns you have with sharing.
- Consult an advocate about safety concerns and options. [See question 7](#) for information on locating an advocate.

Do advance planning for sharing:

- Discuss what will be released with your provider, along with how it might be shared, and what will happen to the information.
- Make sure what is shared is accurate. Ask to your care provider to show you any written documents before they are shared, or to describe what he or she will say in any conversations about you.
- Choose a method of sharing that will reduce the risks of unintended disclosures. For example, a phone call between care providers may be less likely to result in unintended

disclosures than a written letter from one provider to another, which may be read by others.

- If the person you are afraid of might see what you shared, be sure that you are informed in advance about when the sharing will occur. If that is not possible, be sure that you are informed about the sharing as soon as possible after it happens.

Limit sharing to the minimum necessary to accomplish your purpose:

- Give your care provider written permission using a written “release” or “consent form” whenever possible.
- Be sure you understand the purpose for sharing your information. Limit what you share to what is needed that purpose.
- Limit the time for your consent to the minimum time needed to share the information.
- Only release your information to people who need to see it.

7. If I need help with domestic violence, sexual assault, or stalking, or if I was asked to release information from my health care records and need help to identify and respond to safety issues, whom should I contact?

National Domestic Violence Hotline: Call toll-free 24 hours a day anywhere in the U.S. Trained counselors provide confidential crisis intervention, support, information, and referrals to persons experiencing domestic violence, as well as to their families and friends. The hotline also links people to help in their area including shelters, counseling, legal advocacy and social assistance programs. Help is provided in English and Spanish with interpreters available for 139 more languages. All calls are confidential and anonymous.

- By telephone: 1-800-799-SAFE (7233).
- For Deaf individuals: 1-800-787-3224 (TTY) / Video phone: 1-855-812-1001 (Monday to Friday, 9 AM—5 PM PST). Deaf individuals can also contact the Hotline using Instant Messenger (DeafHotline) or Email deafhelp@thehotline.org.
- For the same services by live chat, visit: <http://www.thehotline.org/what-is-live-chat/>.

National Sexual Assault Hotline: Call toll-free 24 hours a day anywhere in the U.S. This service provides confidential counseling and support for individuals who have experienced sexual assault. The hotline automatically routes calls to the rape crisis center nearest the caller by reading the area code and prefix of the caller's phone number.

- By telephone: 1.800.656.HOPE (4673).
- Online hotline: <https://ohl.rainn.org/online/>.

For victims of stalking:

- [National Stalking Resource Center](#)

- National Center for Victims of Crime (Help for Crime Victims):
<http://www.victimsofcrime.org/help-for-crime-victims>

Michigan Resources

- To find the Michigan domestic violence or sexual assault program that is nearest your location, visit:
 - The Michigan Coalition to End Domestic and Sexual Violence at www.mcedsv.org/help/find-help-in-michigan.html, or
 - www.michigan.gov/domesticviolence.
- Assistance for members of Native American communities who have experienced domestic violence, sexual assault, or stalking can be found by contacting [Uniting Three Fires Against Violence](http://www.unitingthreefires.org) at (906) 253-9775.
- The Community Health and Research Center at the Arab Community Center for Economic and Social Services (ACCESS) offers a Victims of Crime Program that serves any victim of crime in the southeast Michigan community, including Wayne, Macomb and Oakland counties. Services include counseling, psychiatric services, case management and legal advocacy for victims of domestic violence, child abuse, sexual abuse, rape, hate crimes, robbery, assault, theft, burglary, and survivors of homicide. Contact them at 313-216-2225 or www.accesscommunity.org/node/329
- [The La Vida Partnership](http://www.chasscenter.org) at LA VIDA Partnership, a community program of the Community Health And Social Service Center in Detroit, is a domestic violence and sexual assault intervention and prevention program that provides linguistically and culturally appropriate services and resources targeted to Latino/a youth and families in Southwest Detroit and Southeast Michigan. Information about this organization is found online at: <http://chasscenter.org/?q=LA%20VIDA>.

8. What should I do if I am in immediate danger?

If you are in immediate danger, call 9-1-1. If you are in your care provider's office and you feel safe for the moment, you may want to ask your provider if the office has a private space and phone so that you can call to speak with someone at a domestic violence / sexual assault service provider program. These programs have staff available 24 hours /day to talk with you confidentially about your concerns and help you with options for safety, advocacy and support.

See [question 7](#) for information on locating an advocacy program.

